

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 10/30/03 2 Serial/Patent # 09/803,522

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input checked="" type="checkbox"/>	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	5	5/7/03	\$ 1300
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$

		7 TOTAL AMOUNT OF REFUND	\$ 1300
8 TO BE REFUNDED BY:			
<input type="checkbox"/>	Treasury Check		
<input checked="" type="checkbox"/>	Credit Deposit A/C #:		
<input checked="" type="checkbox"/>	, 50 -- 0631		
10 REASON:			
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	Duplicate Payment	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	No Fee Due (Explanation):		

*Petition Dismissed As Moot.*

11 REFUND REQUESTED BY:	<input type="checkbox"/>		
TYPED/PRINTED NAME:	<u>Andrea Smith</u>	TITLE:	<u>Pat. Examiner.</u>
SIGNATURE:	<u>Andrea Smith</u>	PHONE:	<u>703/308-6711</u>
OFFICE:	<u>Off. of Petitions</u>	*****	
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED:	<u>Alvin Hill</u>	DATE:	<u>7/7/03</u>

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B